



Hospital Caterers Association

PROTECTED MEALTIMES POLICY

This sample policy can only ever be a starting point for Trusts and Health Boards. As each healthcare environment is different, this policy would require tailoring to meet the needs of the patient/client group and achieve local ownership.

Introduction

Mealtimes are not only a vehicle to provide patients/clients with adequate nutrition but also provide an opportunity to support social interaction amongst patients/clients. The therapeutic role of food within the healing process cannot be underestimated. However, food, even if it is of the highest quality is only of any value if the patient/client actually eats it!

Clinical areas, where meals are served often adopt different approaches to mealtimes, these can vary both between wards & from day to day. In addition there are a number of environmental factors, which may influence whether a patient/client eats or not.

A Protected Mealtimes policy will seek to provide a framework for mealtimes without stifling new ways of working, placing the patient/client at the centre of the mealtime experience.

The purpose of a Protected Mealtime Policy is to protect mealtimes from unnecessary and avoidable interruptions, providing an environment conducive to eating, assisting staff to provide patients/clients with support and assistance with meals, placing food first at mealtimes.

Background

A greater understanding in the importance of the patient meal experience and nutritional requirements are increasing within the wider healthcare team. Food and the service of food is now regarded by many as an essential part of treatment.

Up to 40% of adults show signs of malnutrition on admission to hospital and often their stay exacerbates the condition. Certain groups of patients, such as the elderly, have particular dietary and eating requirements that need to be met to prevent malnutrition and to aid recovery.

The ward environment, presentation of food and the timing and content of meals are important elements in encouraging patients to eat well. The importance of mealtimes needs to be re-emphasised and ward based staff given the opportunity to focus on the nutritional requirements of patients at mealtimes.

Key Points

- To provide mealtimes free from avoidable and unnecessary interruptions.

- To create a quiet and relaxed atmosphere in which patients/clients are afforded time to enjoy meals, limiting unwanted traffic through the ward during mealtimes, e.g. estates work and linen deliveries.
- To recognise and support the social aspects of eating.
- To provide an environment conducive to eating, that is, welcoming, clean and tidy.
- To limit ward based activities, both clinical (i.e. drug rounds) and non-clinical (i.e. cleaning tasks) to those that are relevant to mealtimes or 'essential' to undertake at that time.
- To focus ward activities into the service of food, providing patients/clients with support at mealtimes.
- To emphasise to all staff, patients and visitors the importance of mealtimes as part of care and treatment for patients.

Aims and Objectives

The aims of this policy are:

- (1) To improve the "meal experience" for patients by allowing them to eat meals without disruption
- (2) To improve the nutritional care of patients by supporting the consumption of food.
- (3) To support ward based teams in the delivery of food at mealtimes.
- (4) To ensure that mealtimes are a key social activity for patients.

Supporting Information – the reasons for a Protected Mealtime Policy

- Dept of Health Essence of Care, Food and Nutrition benchmark.
- NHS Estates, Housekeeping Project (England) – 'get the basics right' so that food is enjoyable and enjoyed.
- NHS Plan (England) – things the public wanted to see – better facilities, higher standards of cleanliness and better food.

The British Dietetic Association (BDA) supports the concept of protected meal times.

Missing meals, or experiencing interruptions during the mealtimes, can compromise a patient's nutritional intake, which could have a negative impact on their health and wellbeing.

As health professionals, we need to work together to ensure that patients have a calm, uninterrupted period of time to eat.

Meal times have in the past been seen by some as interruptions to a patient's treatment, now they are seen as part of it.

Eating is an integral part of treatment, it is important for patients to have uninterrupted time to eat and enjoy meals.

Simon A Williams, Director of Policy, The Patients Association

"Making sure that our patients get the opportunity to eat and enjoy appetising and nutritious food is one of the most important aspects of nursing care. Research shows that over forty per cent of people who come into hospital are malnourished and seventy per cent become even further malnourished during their hospital stay. Nurses at every level have a key role to play in ensuring that patients' mealtimes are seen as an important part of their care and treatment, where they can enjoy the social as well as nutritional benefits of eating in a relaxed and welcoming atmosphere."

Royal College of Physicians, A doctor's responsibility 2002

"Doctors can help to promote more satisfactory nutrition for patients by making sure that as far as possible:

The service and consumption of meals is not interrupted by ward rounds or routine tasks which could take place at other times

Procedures, such as x-rays, are scheduled to ensure, whenever possible, that patients do not miss meals

Nutritional care depends on teamwork between health care workers in different disciplines, the scope and contribution of whose work should be recognised"

British Association for Parenteral and Enteral Nutrition, Hospital Food as Treatment 1999

Interruption of patients' meal times by ward rounds and procedures should be minimised, and each ward should have a clear policy in this respect.

The environment at meal times should be made as conducive to eating as possible.

Protected Mealtimes

In order to maximise the benefits to patients, from the mealtime experience, clinical staff are required to prepare themselves, the environment and their patients/clients prior to the service of food.

The following principles should be adopted in all clinical areas where patients/clients receive food, however, it is acknowledged that in a number of clinical settings patients/clients manage their own mealtime preparations.

Protected mealtimes are periods when all ward based activities (where appropriate) stop to enable nurses, ward based teams, catering staff and volunteers to serve food and give assistance and support to patients.

Patients should be able to eat their food in a relaxed environment, at their own pace and rest afterwards.

- Nursing staff will make food a priority during mealtimes, providing assistance and encouraging patients to eat, being aware of how much food is eaten and identifying patients nutritionally at risk.
- Ward based teams will organise their own mealtimes to maximise the number of staff available to deliver and assist patients/clients with food.
- Where appropriate, ward based teams will provide patients/clients with assistance to use the toilet prior to the service of food.
- Prior to the service of food all patients/clients will be given the opportunity to wash their hands.
- Patients/clients will be made comfortable prior to the service of meals, with food served within a comfortable reach, patients/clients supported by an appropriate eating position.
- Patients requiring assistance with food will be identified to the ward/unit team prior to the service of meals.
- The ward may consider closing to visitors during mealtimes, but there must be a general agreed approach to mealtimes. The patient/client and their relatives should be made

aware of the mealtime policy as soon after admission as is reasonably possible. Inclusion of this information into patient information booklets is recommended.

- Interruptions e.g. ward Rounds, Drug rounds, GP visits, cleaning, documentation and therapy will only occur (during mealtimes) when clinically appropriate.
- Staff directly involved with patients/clients at meal times will avoid answering the telephones. Clinical areas may consider diverting telephones at meal times.
- Consideration will be given to where patients/clients sit to eat their meals, supporting the social aspects of mealtimes whilst respecting the preferences of the individual.
- Each table will be clean and suitably prepared prior to the service of food and beverages, with appropriate tablecloths, place mats, cutlery, crockery and condiments.
- Bed tables and eating areas will be cleared (prior to the service of food) of items not conducive to mealtimes e.g. urine bottles and used dressings.

Training and Communicating the policy

- The principle of a Protected Mealtime needs to be established within the ward routine and structured day.
- Appropriate signage should be developed and displayed outside the ward, to inform staff and visitors of the protected meal time period.
- Medical staff and other healthcare professionals such as Radiographers and Phlebotomists should be consulted in changes to ward routines to ensure patient care is enhanced.
- Staff should be aware of the Essence of Care, Food and Nutrition benchmark, the importance of patient nutrition and the environmental impact in food consumption.
- Include the principles of Protected Mealtimes into the induction training for all staff.
- Communicating the principles of protected mealtimes to visitors and carers should not be overlooked. Carers and visitors can support patients/clients with food and should be supported in this role.
- Emphasise the importance of teamwork and co-operation between Catering/Facilities staff and ward based teams.
- Support ward based teams in the policing of the Protected Mealtimes policy.

Review Procedure

This policy will be reviewed by.....group, periodically, but at least once per year following its adoption as a Trust/Health Board policy.

The chair of this group will assume responsibility for the Trust/Health Board Protected Mealtimes policy.

Recommendation

The Trust/Health Board is asked to introduce a Protected Mealtimes policy for this Trust. April 2004.